MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51						
2		i						52						
3		i						53						
4		1						54						
5		i						55						
6		.						56						
7		1						57						
8	i							58						
9		1						59						
10		1						60						
11		i						61						
12		1						62						
13		1						63						
14	i							64						
15		1						65						
16		1						66						
17		i						67						
18		i						68						
19		1						69						
20		1						70						
21	1							71						
22		i						72						
23		j						73						
24		i						74						
25		i						75						
26		1						76						
27		1						77						
28	1							78						
29		1						79						
30		1						80						
31		i						81						
32		1						82						
33	.	i						83						
34	1							84						
35		1						85						
36		1						86						
37		1						87						
38		i						88						
39		1						89						
40		i						90						
41	1							91						
42		1						92						
43		1						93						
44	1							94						
45		1						95						
46	1							96						
47		1						97						
48								98						
49								99						
50								100						
TOTAL IND.	G		↵		↵			TOTAL IND.			↵		↵	
TOTAL DEP.			↵		↵			TOTAL DEP.			↵		↵	
TOTAL CLAIMS								TOTAL CLAIMS						